



NOTICE OF APPEAL FROM THE PRIMARY EXAMINER  
TO THE BOARD OF APPEALS

Applicants:  
Application No.:

Peter A. Ronzani, Jeffrey Jacobsen, Ronald Gale and Stephen Pombo

08/857,273

Group: . 2774

Filed:

May 16, 1997

Examiner: X. Wu

For:

PORTABLE COMMUNICATION DISPLAY DEVICE

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C. 20231	
on September 27, 2000 Date	<i>Stacey Gross</i> Signature
STACEY GROSS Typed or printed name of person signing certificate	

RECEIVED  
OCT 12 2000  
TC 2100 MAIL ROOM

Assistant Commissioner for Patents  
Box AF  
Washington, D.C. 20231

Sir:

Applicant hereby appeals to the Board of Appeals from the decision dated March 27, 2000 of the Primary Examiner finally rejecting claims 21-29, 31-48, 50-56 and 68-85. The item(s) checked below are appropriate:

- ☒ Applicant hereby petitions to extend the time for filing a Notice of Appeal in response to the Office Action Made Final dated March 27, 2000 for three-months from June 27, 2000 to September 27, 2000.
- ☐ A ☐ month extension of time to respond to the Office Action Made Final dated ☐ was filed on ☐ with payment of a \$☐ fee.  
☐ Applicant hereby petitions for an additional ☐ month extension of time to respond to the Office Action Made Final.
- ☐ An Oral Hearing before the Board of Appeals is respectfully requested.

## 4. Fees are submitted for the following:

<input checked="" type="checkbox"/>	Extension of Time for three-months		\$	870
<input type="checkbox"/>	Additional Extension of Time:			
	Fee for Extension	( <input type="checkbox"/> mo.)	\$	
	Less fee paid	( <input type="checkbox"/> mo.)	- \$	
	Balance of fee due		\$	0
<input type="checkbox"/>	Oral Hearing		\$	
<input checked="" type="checkbox"/>	Notice of Appeal		\$	300
<input type="checkbox"/>	Other		\$	
			TOTAL	\$ 1170


## 5. The method of payment for the total fees is as follows:

- ☒ A check in the amount of \$1170.00 is enclosed.
- ☐ Please charge Deposit Account No. 08-0380 in the amount of \$[ ].

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this document is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH, REYNOLDS, P.C.

By   
Thomas O. Hoover  
Registration No.: 32,470  
Tel.: (781) 861-6240  
Fax: (781) 861-9540

Lexington, Massachusetts 02421-4799  
Date: September 27, 2000